



**Clark County Medical Society Alliance  
Membership Application  
(2010–2011)**

*To join or renew your membership, mail the application, along with a check payable to “CCMSA” to  
CCMSA Membership c/o Jessica Kartzinel at  
2012 Doral Ct.  
Henderson, NV 89074  
**Amount \$85.00**  
(Cash or check only)*

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Work: \_\_\_\_\_

Cell: \_\_\_\_\_ E-mail: \_\_\_\_\_

Occupation/Educational Background: \_\_\_\_\_

Spouse's Name: \_\_\_\_\_

Spouse's Specialty: \_\_\_\_\_

Spouse's Practice/Group Name: \_\_\_\_\_

Spouse's Practice/Group Phone Number: \_\_\_\_\_

**Are you interested in placing an Ad in the Membership Directory?  Yes  No**  
**Please ask for Ad price listing. Sponsorship deadline is October 1<sup>st</sup> 2010.**

I have an interest in the following special interest groups:

- Book Club       Play Group       Cooking Club       Dining Group  
 Scrapbooking Club       Fashion Show       \_\_\_\_\_ (Other Suggestion)

I would like information on the following committees:

- Legislative       Spring Fundraiser       Community Health       Greeting Card Project

If you have any questions regarding Membership, Sponsoring the Membership Directory, or other Alliance concerns, please contact Membership Chairs:

- Pam Tolan – [pamtolan@cox.net](mailto:pamtolan@cox.net) or 614-1358
- Jessica Kartzinel – [kartzqirl@cox.net](mailto:kartzqirl@cox.net) or 567-4181

Unless otherwise directed in writing, the information provided may be placed in the membership directory provided to members only.

2590 E. Russell Road, Las Vegas, NV 89120 • Telephone 702.739.9989 • Fax 702.739.6345